

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

89/52476

FILING DATE

1-2-01

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL NO.	3					
TOTAL DEP.	15					
TOTAL CLAIMS	18					

	IND.		DEP.		IND.		DEP.	
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